

Nutrition and WIC Update

Breastfeeding Peer Counselor Program

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The United States Department of Agriculture (USDA) is proud of WIC's accomplishments in promoting, encouraging and supporting breastfeeding as the preferred method of infant feeding. USDA is working to institutionalize breastfeeding peer counselor (BFPC) programs as a core service in WIC clinics. The mother-to mother support that the BFPC program provides will increase the breastfeeding rates of WIC mothers.

Congress provided WIC with special funding to support BFPC programs in all states. USDA entered into a cooperative agreement with Best Start Social Marketing to gather information from current WIC and non-WIC BFPC programs. The information gathered led to a clear understanding of the components necessary to sustain effective BFPC programs, and how to structure the programs to be cost effective and manageable.

The USDA definition of a BFPC is a woman in the community with personal breastfeeding experience who provides information and support to WIC mothers. BFPC will have similarities with WIC participants including similar ethnic background, current or previous WIC participation and an enthusiasm for breastfeeding.

Training will take place sometime between April and June 2005 on a curriculum to be used to train local BFPC. The special funds will not be available until this training occurs. The funds will support BFPC programs in WIC clinics in Kansas that agree to certain components of the USDA BFPC program. Kansas has submitted a plan to USDA for approval. It is our plan to send out packets to local agencies in December with information on applying for BFPC funds. The clinics selected will need to demonstrate the ability to:

- ❖ Select a BFPC supervisor who has some breastfeeding training.
- ❖ Refer WIC participants to either WIC clinic staff or other community agency staff that are trained in the management of breastfeeding problems outside the BFPC scope of practice.
- ❖ Document that the BFPC supervisor will be readily available for questions and mentoring of the BFPC.
- ❖ Include BFPC in clinic staff meetings that discuss WIC issues and breastfeeding in-services.
- ❖ Allow BFPC to attend statewide yearly training to meet with other BFPC.
- ❖ Provide the BFPC with adequate pay including those hours worked outside of the normal clinic hours.

Letters of support will be requested from key agencies outside the WIC clinic to verify the outside agency's intent to support and strengthen the BFPC activities. State WIC staff are excited about this important program. As some of you might remember, Kansas has had a BFPC program; however, because funds were not available and BFPC were volunteers, most programs are not active.

The Power Of Mother-To-Mother Connections



"That's what it's
all about... moms
helping moms."

WIC Peer Counselor

PEER COUNSELING: MAKING A DIFFERENCE FOR WIC FAMILIES

Little Burlingame

Monica Meek (a.k.a. Little Burlingame), WIC Vendor Manager

Actors and actresses at one time obtained their stage name from the name of the first pet they owned plus, the name of the first street they lived on-or so the story goes. This was one of the fun pieces of information obtained at the recently held Mountain Plains State Vendor Manager Conference. But of course not the most important piece.



Information was packed into three days. Vendor managers attended from various states. USDA representatives including a representative from Washington D.C. attended. Each state shared new information and reviewed old ideas. New or old, one conclusion was reached: Vendor Management is an important element of WIC.

Management of the vendor element encompasses not only working with vendors but also with the participants who rely on these vendors for the products. Training must be conducted with both the participants and the vendor to ensure participants obtain the products that contain the nutrients “prescribed.” The check cashing procedure must be reviewed so mistakes do not cost the vendor or the participant.

Vendors must be monitored by the State Agency to evaluate prices thus, allowing for cost containment. Inventory of WIC products occurs to make sure participants have access to products. Shelf labels are looked at to determine if they are correct therefore providing assistance to the WIC consumer. All of these elements are just a glimpse of the vendor side of WIC.

Monitoring, training, complaints, complaint management, technical assistance are all elements of vendor management but each is not just a name, a heading, and a window in the Vendor Application. Behind each is a bigger picture and more details that allows for the proper management of vendors and WIC overall.

Managing this bigger picture, serving as the Vendor Contact for the local agency can be compared to the job of an actor or actress. Like an actor or actress the Vendor Contact takes on different roles. One day it might be a trainer or the next a mediator as you work through a vendor complaint. Whatever role, title or name you take on acting as the Vendor Contact and managing vendors is essential to the success of WIC.



Question and Answer



Q: There is not enough information displayed in the Potential Dual Participant pop up window to determine dual status of a client. What can I do?

A: There are several ways to obtain more information. Of course, questioning the client is one way and calling the other clinic another way. You can also click the **[Transfer in the Client]** button. Doing this will ask you if you want to complete the Prescreen wizard before closing. Select **[No]** and you will be taken directly to the Transfer In State Wizard. Find the potential dual clients and use the additional information to compare information and determine dual status. If they are the same client, complete the transfer. If not, close the Transfer In State Wizard and begin a new Prescreen. When Potential Dual Participant pops up again, you are now armed with additional information, and can select **[Not Dual Participant]** and type in an appropriate note. Adding more information about the client on the Potential Dual Participation Pop Up is a much requested enhancement to KWIC.

Q: Can the local agency replace WIC checks for vendors?

A: The local agency cannot replace checks for vendors. If a vendor has a check that is rejected due to an error the vendor should send the check and documentation to the State Agency (SA) for review. WIC vendors have been sent information regarding replacement of a WIC check. Only the **SA** can provide a replacement check for the vendor.

Fruits and Vegetables Keep the Doctor Away

Martha Hagen

Mom was right! “Eat your fruits and vegetables.” Regular consumption of fruits and vegetables is associated with less risk of cancers, heart disease, Alzheimer’s, diabetes, cataracts, central neurodegenerative diseases and the functional decline of aging. Perhaps, fruit and vegetable consumption is associated with good health in general and may prevent regular consumers catching “that bug that is going around.”



Mom was right! Eat your fruits and vegetables every day!

Antioxidants in fruits and vegetables are the bioactive compounds responsible for health promotion and disease prevention. Antioxidants include Vitamin E, Vitamin C, beta carotene, lycopene and about 8000 phytochemicals such as the flavonoids and carotenoids. Researchers have been trying to find the one purified phytochemical that has all the benefits of fruits and vegetables. They have been looking for the magic bullet and so far individual antioxidants studied in clinical trials do not have consistent preventative effects. However, numerous studies have shown fruits and vegetables to have a protective effect singly or combined.

When eating a diet rich in fruits and vegetables, which ones have the most antioxidant value? Testing shows that the total antioxidant activity of the phytochemicals in one medium apple with skin is equivalent to that of 1500 milligrams of Vitamin C. Consider that the daily requirement for Vitamin C is 100 milligrams. Plums too have a high antioxidant activity and the more colorful the fruit or vegetable the more antioxidant activity. The most antioxidant activity was shown for fruit and vegetable combinations. Researchers are concluding that it is the additive and synergistic effect of antioxidants in fruits and vegetables that produce the most health benefits. Eat a diverse diet with five to nine servings of fruits and vegetables every day for preventative health benefits.

It's difficult to think anything but pleasant thoughts while eating a homegrown tomato.

~Lewis Grizzard

Liu, Rui Hai. Health benefits of fruit and vegetables are from additive and synergistic combinations of phytochemicals. *American Journal of Clinical Nutrition* 2003;78(suppl):517S-20S.

Consumption of Soda Tied to Weight Gain

Pat Dunavan, Nutrition Education Specialist

A new study, released in August shows that women who drink non-diet soda or fruit punch every day gain weight quickly and face an elevated risk of diabetes. The risk pertained to drinks sweetened with either sugar or high-fructose corn syrup. The study is part of the ongoing Nurses’ Health Study II, involving 91,249 women through questioning them on a variety of health issues over many years.

In this study, data were collected from 51,603 women over an average of four years. Researchers found that the women who gained the most weight were those who increased their consumption of non-diet drinks from one or fewer per week to one or more per day. Such women gained an average of 10.3 pounds, compared with an average of slightly less than three pounds for those who consumed one drink or less per week.

In addition, those who had one or more drinks containing sugar or corn syrup per day were 83 percent more likely to develop Type 2 diabetes than those who drank less than one such drink per month. Neither diet soda or unsweetened fruit juices appeared to carry the same risks.



Progress on New KWIC Group

Roger Lewis, KWIC Project Manager

The WIC Advisory Committee (WAC) made the decision in their July meeting to form a group that would supply input and guidance in the support of KWIC. Since then 18 local clinic staff from across the state have volunteered to participate. Volunteers represent every WIC role: five Coordinators (also perform other roles), eight Clerks, five RD's, and five RN's.

The tasks for the group are not yet set and will likely be finalized in the first meeting sometime in November. The major work will be to review proposed system changes and set priorities for Client Services, Local Vendor Management, and Community Activity. Other tasks to be discussed are:

- Review of help desk calls
- Identify training needs
- Provide input for training material
- Participate in system design
- Participate in system testing

The startup was reviewed with WAC in their October meeting with an agreement to go forward with the group as planned. Letters went out to all volunteers to confirm that the clinic supported their participation and to set the date of the first meeting. We will let you know what happens in that first meeting in the next newsletter.

Fiscal Fitness

Randy Volz, WIC Fiscal Consultant



Welcome to our new Fiscal Fitness section that will appear occasionally to provide information on how to better exercise your fiscal conditioning to make funding documentation and planning easier. We will provide guidance, tips of the trade, updates on State Agency (SA) initiatives, and long-range federal funding projections to better enable you to plan your fiscal fitness regimen.

For our opening exercise, let's look at KWIC. Now that we have a new and improved way of delivering services to our clients thanks to KWIC, we also have new opportunities to get fiscally fit in our local agencies (LA) and at the state WIC office. We are analyzing how the KWIC system has changed the way we do WIC business at both SA and LA, and the resulting impact on administrative costs. How are they the same? How are they different? How are we funding them? Not only are we analyzing changes in costs for WIC in Kansas, but we are also looking for better ways to allocate program funding at both the SA and LA levels.

We will be asking for input from LA staff and health department administrators on many issues, so be on the look out for information from the SA on a number of changes and initiatives on the horizon. Some items on our list include allocating KWIC expenses between the SA and LA, the electronic reporting of LA expenditures, and revisions to the LA funding formula, and revising the LA WIC contract funding period to match the federal fiscal year.

We always value your input on anything relating to delivering a quality WIC program to our clients. We need your input on funding and cost issues, so please don't hesitate to contact us any time you have questions or ideas you think may be beneficial to the SA or other LA.

Risk Factor Update - Dental Problems

Sandy Perkins, Maternal and Child Nutrition Consultant

The risk factor “Dental Problems” is defined as a diagnosis of selected dental problems. The selected dental problems include, but are not limited to:



- The presence of nursing or baby bottle caries (also known as early childhood caries), and smooth surface decay of the maxillary anterior and the primary molars in infants and children. Early childhood caries may result from inappropriate feeding practices. Nutrition counseling can prevent primary tooth loss, damage to the permanent teeth, and potential speech problems. The risk factor may be assigned based on the presence of these conditions, it is not necessary to show that the condition is limiting food intake.
- A diagnosis of tooth decay, periodontal disease, tooth loss and / or ineffectively replaced teeth that impairs the ability to ingest food in adequate quantity or quality in children and all categories of women. The presence of any of these problems can seriously affect chewing ability, leading to eating only certain foods, which in turn affects nutritional intake. The risk factor can only be assigned if the client / caregiver indicates that the condition is impairing the ability to consume foods.
- A diagnosis of gingivitis of pregnancy for pregnant women. Periodontal disease is a significant risk factor for pre-term low birth weight resulting from pre-term labor or premature rupture of the membranes. There is evidence that gingivitis of pregnancy results from “end tissue deficiency” of folic acid and will respond to folic acid supplementation as well as plaque removal. . The risk factor may be assigned based on this diagnosis alone, it is not necessary to show that the condition is limiting food intake.

Either a physician or another health care provider working under the orders of a physician must diagnose the problem(s) or the CPA must adequately document the condition in the WIC record. Adequate documentation by the CPA includes a note in the WIC record stating the CPA looked into the WIC client’s mouth and saw evidence of the dental conditions.

This just in...

Brad Iams, WIC Program Consultant

“Houston...we have a problem...” It has come to the attention of the state WIC office that there is faulty equipment in the world of WIC. What, you ask, could it be? It just so happens that the problem is the little purple WIC identification folders given to all WIC caregivers/participants. The life of these handy folders is limited and apparently short lived. I have personally seen these WIC folders in tattered pieces. Participants are always asking for new folders to hold their WIC checks, appointment letters, various handouts, and immunization cards.

It has been suggested that investing in plastic sleeves would be a novel idea and may help protect and prolong the life of the WIC folder. However, there is only so much you can stuff into a plastic sleeve before the seams give way, and you are left with a useless piece of plastic. After many long sleepless nights I had a revelation...are you ready...this is genius...ZIPLOC bags! Wow! What a great idea! There you have it, the idea of the century...ok so it may not be that big of a deal, but Ziploc bags would work great. There are dozens of kinds and sizes to choose from, and they are rather inexpensive. Most WIC participants already have a supply at home. The next time a participant asks for a new WIC identification folder you can tell them the following: “You know, if you put all of your WIC identification folder into a Ziploc bag it would be better protected from all of the elements.” This simple idea would make the WIC participant happy and prolong the life of WIC folders.



Portion Distortion!

Do You Know How Food Portions Have Changed in 20 Years?

Anyone eating on the run or at restaurants has probably noticed that food portions have gotten larger. Some portions are called "super size," while others have simply grown in size and provide enough food for at least two people. With this growth have come increases in waistlines and body weight.

The "Portion Distortion" quiz, found on the National Heart, Lung and Blood Institute/National Institutes of Health Web site, reveals that the change in food sizes over the past 20 years, by showing two pictures side by side, the first illustrates the portion size 20 years ago and the second depicts sample portion sizes of today. Below the first picture is the number of calories supplied 20 years ago. The first question asks you to select the number of calories you think are in today's portion.

To maintain your weight, the extra calories you eat need to be burned up through physical activity. The second question is how much physical activity is required to burn up the extra calories provided by today's food portions.

The quiz features Bagels, Cheeseburgers, Spaghetti and Meatballs, Soda Pop, French Fries, and a Turkey Sandwich. The quiz is fun and enlightening. Give it a try by going to <http://hin.nhlbi.nih.gov/portion/>.



NATIONAL INSTITUTES OF HEALTH National Heart, Lung, and Blood Institute

Portion Distortion Interactive Quiz

[Healthy Weight Home](#)
[BMI Calculator](#)
[Menu Planner](#)
[OEI Home Page](#)

[Previous Question](#)
[Back to Beginning](#)
[Next Question](#)

Bagel

20 Years Ago	Today
	
3-inch diameter 140 calories	??? calories

A bagel 20 years ago was 3 inches in diameter and had 140 calories. How many calories do you think are in today's bagel?

☐ 350
 ☐ 250
 ☐ 150

[Check Your Answer!](#)

Local Agency News

We welcome these new employees:

Anderson County: Collene Ellis, RN
Barton County: Zenaida Vasquez, Interpreter
Cowley County: Juli Hickenbottom, RN
Harper County: Amy Gose, Clerk
Jackson County: Amy Hallauer, RN
Trego County: Nicole Mattheyer, Clerk
Sedgwick County: Bridget Thomason, RD

Atchison County: Michelle Cullens, RD
Cloud County: Leslie Winkle, Clerk
Greeley County: Lisa Wineinger, RN
Harper County: Rishelle Wilson, Clerk
Kingman County: Shondra Kostner, Clerk
Sedgwick County: Marie Socorro Lozano, Clerk



We say farewell to these friends:

Atchison County: Angela Humburg, RD
Ford County: Betty Estrella, Clerk
Kingman County: Darlene Wolfe, Clerk
Sedgwick County: Sylvia Smith, Clerk
Sedgwick County: Jody Vance, RD
Wyandotte County: Jessica McCarthy, RD

Cloud County: Marcia Jensen, Clerk
Harper County: Tiffani Black, Clerk
Neosho County: Cathy Lockwood, RN
Sedgwick County: Humda Reali, RD
Trego County: Yuvonne Kraft, Clerk

Congratulations to Lee and Paula Roberts on the birth of their son, Zane on August 24, 2004. Paula is a RN in Neosho County.

Congratulations to Maria Kochi and Alicia Ramey from Sedgwick County WIC. Both passed the IBCLC exam!! We now have six certified lactation consultants working in county health departments in Kansas.

Web Sites Of Interest

www.cdc.gov/groupbstrep A new brochure is available from CDC entitled "Protect Your Baby from Group B Strep." This pamphlet is designed to help educate pregnant women about the risk of Group B Strep to themselves and their infants. The brochure may be downloaded or ordered by accessing the Web site.

<http://lancaster.unl.edu/food/resources.htm> Want some new resources? Check out this site from the University of Nebraska Extension. Their newest handouts and training materials are on food safety and washing away germs.

<http://www.statehealthfacts.kff.org> This site supported by the Kaiser Family Foundation provides you state specific data on family income, poverty levels, demographics, and more. Check out how Kansas fares compared to the rest of the United States.

http://www.frac.org/hunger_in_the_us/html FRAC has several new studies related to hunger and obesity in the U.S. Check here to see the latest research on the effects of hunger on our WIC participants.

http://www.cdc.gov/nccdphp/dnpa/qualitative_research Interested in an inventory of the latest research on physical activity and nutrition? Then check out this CDC site. The inventory allows users to search for information using search fields, entering keywords, or searching the entire database. No registration or password is required.

<http://www.cdc.gov/nchs/healthywomen.htm> This site has extensive data on the Women's Health chartbook indicators and many other health topics and was developed by CDC's National Center for Health Statistics, with support from the HHS Office on Women's Health.

<http://www.nal.usda.gov/fnic/pubs/bibs/edu/98-child.htm> Want a comprehensive list of nutrition education materials for child-care and preschool staff? Then check out the newest list from the Food and Nutrition Information Center (FNIC) of the USDA's Agricultural Library.

Nutrition and WIC Services

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origin, sex, age or disability, write to the Secretary of Agriculture,

USDA, Washington, DC.

WE'RE ON THE WEB!

WWW.KDHE.STATE.KS.US/NWS-WIC



Growing healthy Kansas families

WTM change! WTM change!



There has been a change in the date of the Hays WIC Technical Meeting (WTM) from March 31 to March 29, 2005. This is the updated list. Be sure your calendar is marked correctly.

- a. Feb. 15 (Tuesday) Lawrence, Holiday Inn
- b. Feb. 23 (Wednesday) Manhattan, Ramada Plaza Hotel
- c. March 2 (Wednesday) Dodge City, Dodge City Community College
- d. March 3 (Thursday) Wichita, Center for the Improvement of Human Functioning International
- e. March 7 (Monday) Greenbush, Southeast Kansas Education Service Center
- f. March 29 (Tuesday) Hays, Holiday Inn
- g. March 30 (Wednesday) Colby, City Limits Convention Center

Attached is a rough draft of the WTM agenda. Actual registration materials and a more detailed agenda will be sent in the November Information Memo. If you would like to provide specific suggestions for the "Potpourri" topics, see the committee contact information attached to the September Information Memo.

Remember at least one person from each clinic is required to attend, but we hope that having regional one-day meetings will allow more staff members to attend. The registration fee is \$15 per person to cover food and some materials.